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APPLICANTS

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** CONTINUING DATA ***** *NONE STS 11/12/04*

** FOREIGN APPLICATIONS ***** *NONE STS 11/12/04*

IF REQUIRED, FOREIGN FILING LICENSE
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**** SMALL ENTITY ******** 06/01/2004**

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35 USC 119 (a-d) <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <u>8TS</u> Examiner's Signature Initials	TN	3	10	1

ADDRESS

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TITLE

Stroller and safety seat combination

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED 385		<input type="checkbox"/> 1.16 Fees (Filing)
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